

Rhode Island Department of Health

Three Capitol Hill Providence, RI 02908-5097 www.health.ri.gov

Immunization Program Update

Date: January 6, 2012

To: Hospital Administrators, Hospital Emergency Departments and Urgent Care Center Physicians

From: Patricia Raymond, RN, MPH

Subject: Recommendations for using Tdap Vaccine for Tetanus Prophylaxis in Wound Management

All hospital emergency departments (ED) and urgent care (UC) centers should administer Tdap (tetanus, diphtheria, pertussis) vaccine instead of Td (tetanus, diphtheria) for wound management to individuals who require a tetanus-containing vaccine and have not already received a Tdap dose. This recommendation from the Rhode Island Department of Health (HEALTH) reflects the most recent Tdap recommendation from the Centers for Disease Control and Prevention (CDC)'s Advisory Committee for Immunization Practices (ACIP) and should be followed to help prevent pertussis (whooping cough). It applies to children 7 years of age and older and all adults (including pregnant women, but only after 20 weeks of gestation).

Background

Nationally, pertussis outbreaks are on the rise. In 2010, one of the largest outbreaks occurred in California resulting in an epidemic. More than 9,000 cases were reported and ten newborns younger than 3 months of age died. Infants, who are either too young to be vaccinated or have not completed their primary DTaP series, are especially at risk of severe disease. Pertussis is typically spread to infants through close contact with infected family members or other caretakers.

A visit to an ER/UC for emergency care or wound management is an opportunity to receive Tdap vaccine. Tdap was licensed in 2005, thus all "tetanus shots" received prior to that year are not Tdap (Tdap is licensed for ages 7 years and older and is routinely administered to children at 11 years of age.) Tdap may be given regardless of the interval since the last tetanus-containing vaccine. Tdap vaccine is available to order through Rhode Island's State-Supplied Vaccine (SSV) program for people of all ages requiring wound management, including adults 65 years of age and older. However, if an adult 65 years of age and older is not receiving wound management care, state-supplied Tdap vaccine cannot be used. In these instances, administer private stock Tdap vaccine or refer the patient to their primary care provider or a pharmacy. If you are not enrolled in the SSV program contact Deborah Porrazzo at 222-7876 or Deborah.Porrazzo@health.ri.gov.

Recommendations for Wound Management

ACIP recommends a tetanus-containing vaccine and tetanus immune globulin (TIG) as part of standard wound management to prevent tetanus. Tetanus toxoid should be given in combination with diphtheria toxoid (Td/Tdap) since periodic boosting is needed for both antigens. The use of single antigen tetanus toxoid (TT) is recommended only when there is a documented severe allergic response to diphtheria toxoid. In all circumstances, the decision to administer TIG is based on the primary vaccination history for tetanus (Table 1).

- Persons who have received a primary tetanus vaccination series <u>and</u> have received a tetanus vaccine <5 years earlier are protected against tetanus and do not require vaccination as part of wound management. However as stated, this is an opportunity to give Tdap if not previously administered.
- Persons with unknown tetanus vaccination histories should be considered not vaccinated
- □ Persons who have not completed the primary series might require tetanus toxoid and passive vaccination with TIG at the time of wound management (Table 1)
- □ For patients previously vaccinated with Tdap, Td should be used if a tetanus vaccine is indicated for wound care

Table 1. History of Previous Tetanus	Clean, Minor Wounds		All Other Wounds ¹	
Vaccination	Tdap or Td ²	TIG	Tdap or Td ²	TIG
Unknown or less than 3 doses	Yes	No	Yes	Yes
3 or more doses	No ³	No	No ⁴	No

- 1. Such as but not limited to, wounds contaminated with dirt, feces, soil, and saliva; puncture wounds; avulsions; and wounds resulting from missiles, crushing, burns and frostbite.
- 2. Tdap is preferred to Td for all patients 7 years of age and older who have not previously received Tdap vaccine.

- 3. Yes, if ≥ 10 years since the last tetanus-containing vaccine
- 4. Yes, if \geq 5 years since the last tetanus-containing vaccine

References

CDC/FDA guidelines on expanded age indication for use of Tdap vaccine: www.cdc.gov/mmwr/pdf/wk/mm6037.pdf CDC guidelines on Tdap vaccine and pregnant women: www.cdc.gov/vaccines/pubs/preg-guide.htm#tdap

CDC guidelines on tetanus and wound management: www.cdc.gov/mmwr/pdf/rr/rr5517.pdf